AO 440 (Rev. 10/93) Summons in a Civil Action

RETURN OF SERVICE

Service of the Summons and complaint was made by me[1]	DATE 12/8/08
NAME OF SERVER (PRINT) Mary Tillman	TITLE Legal Assistant

Check one box below to indicate appropriate method of service

☐ Served personally upon the defendant. Place where served: _____

_____

☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.

Name of person with whom the summons and complaint were left: _____

☐ Returned unexecuted: _____

_____

_____

☒ Other (specify): Certified Mail - # 7007 3020 0001 6805 2658

_____

_____

STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL

DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on 12/5/08   Mary V. Tillman
                    Date   Signature of Server

Prochniak Weisberg, P.C.
7 S. Morton Ave.
Morton, PA 19070
_____
Address of Server

[1] As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.

SENDER: *COMPLETE THIS SECTION*

- ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ■ Print your name and address on the reverse so that we can return the card to you.
- ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lebanon County
400 S. 8th St.
Lebanon, PA 17042

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X _Deana d_ ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) _Deana L. Reinhold_   C. Date of Delivery 12-5

D. Is delivery address different from item 1? ☐ Yes
   If YES, enter delivery address below: ☐ No

3. Service Type
   ☒ Certified Mail   ☐ Express Mail
   ☐ Registered   ☐ Return Receipt for Merchandise
   ☐ Insured Mail   ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)*   ☐ Yes

2. Article Number
   (Transfer from service label)   7007 3020 0001 6805 2658

PS Form 3811, February 2004   Domestic Return Receipt   102595-02-M-1540